

HAWAII STATE ETHICS COMMISSION 1001 BISHOP STREET, ASB TOWER 970 P.O. BOX 616, HONOLULU, HAWAII 96809

TEL: 587-0460 FAX: 587-0470 email: ethics@hawaiiethics.org

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STATE OF HAWAII STATE ETHICS COMMISSION

LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

PART I LOBBYIST				
NAME(Last)	(First)	(Middle)	TELEPHONE	
17 1112(2001)	(1 1131)	(Middle)	TELETITORE	
Tamamoto	Brian		(808) 546-8800	
<u> </u>				
MAILING ADDRESS (Street)			FAX	
P.O. Box 2200				
2000 2011 11110				
(City)	(State)	(Zip	Code)	
Honolulu	Hawaii	968	96841	
попотата	Hawari	700	7.1	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby) TELEPHONE				
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Hawaiian Telcom,	Inc.		(808) 546-8800	
MAILING ADDRESS (Street)			FAX	
P.O. Box 2200				
(City)	(State)	(Zip	Code)	
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Honolulu	Hawaii	968	41	

PART II ORGAN	IZATION	
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE
Hawaiian Telo	(808) 546–8800	
MAILING ADDRESS (S	FAX	
P.O. Box 2200	0	
(City)	(State)	(Zip Code)
Honolulu	Hawaii	96841
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT		EMENT TELEPHONE
JoAnn C. Yos	emori	(808) 546–3868
MAILING ADDRESS (S	Street)	FAX
P.O. Box 220	0	(808) 546–8500
(City)	(State)	(Zip Code)
Honolulu	Hawaii	96841

PART III DESCRIPTION C	OF SUBJECTS UPON WHIC	CH YOU EXPECT TO LOBBY		
Agriculture	Education	Human Services	Science, Technology & Economic Development	
X Communications & Public Utilities	Government Operations & Finance	Intergovernmental Relations, International Affairs	Tourism & Recreation	
Consumer Protection & Commerce	Hawaiian Affairs	X Labor & Employment	Transportation	
Culture, Arts, Historic Preservation	Health	Planning, Land & Water Use Management	Other: (indicate below)	
Ecology, Energy Environmental Protection	Housing	Public Safety & Corrections		
				
PART IV CERTIFICATION	OF LOBBYIST			
Lhereby certify that the	information furnished above	is, to the best of my knowledge,	correct and complete.	
BAV		1/19/0) (a	
	(Signature of Lobbyist) (Date)			
PART V AUTHORIZATIO	N TO LOBBY			
NAME		TITLE OF AUTHORIZING OFFICER	OR PERSON REPRESENTED	
Michael S. Ruley	Chief Executive Officer			
NAME OF ORGANIZATION (if app	licable)	TE	LEPHONE	
Hawaiian Telcom, Inc.			(808) 546–7844	
MAILING ADDRESS (Street)		FA	x	
P.O. Box 2200				
(City)	(State) (Zip)	
Honolulu	Hawaii 96841			
I hereby authorize the a	bove - named person to end	gage in lobbying activities on beha	alf of the undersigned.	
- Wall blaked 1/24/06				
(Signature of Authorizing Officer or Person Represented)				